Frash, Stephanie

From:

Wiggins, Mike

Sent:

Thursday, June 09, 2005 2:01 PM

To:

Frash, Stephanie

Subject:

FW: MP0388 MP0388.I

Please print and prepare IDS for 388, 388I and 388I2

----Original Message----

From: Eric Janofsky [mailto:janofsky@marvell.com]

Sent: Thursday, June 09, 2005 1:39 PM

To: Amanda Gorthy; Kimberly Benjamin; Wiggins, Mike; Stevens, Stephanie; Terry, Lisa

Subject: MP0388 MP0388.I

http://computer.howstuffworks.com/framed.htm?
parent=question352.htm&url=http://www.antennex.com/shack/Dec99/beads.htm

Please file this document in MP0388 and its family.

Eric

Eric B. Janofsky

Vice President of Intellectual Property and General Patent Counsel Marvell Semiconductor,

Inc.

700 First Avenue, Mail Stop 509

Sunnyvale, CA 94089

Legal Department Fax Number: 408-752-9034

Main number: 408-222-2500 Direct number:408-222-9071

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Frash, Stephanie

From: Sent:

Wiggins, Mike

Thursday, June 09, 2005 2:01 PM

To:

Frash, Stephanie

Subject:

FW: http://www.murata.com/emc/knowhow/pdfs/te04ea-1/23to25e.pdf MP0388 and MP0388.I

This one too.

* * * * Michael Wiggins Harness, Dickey & Pierce, P.L.C. (248)641-1211

----Original Message----

From: Eric Janofsky [mailto:janofsky@marvell.com]

Sent: Thursday, June 09, 2005 1:33 PM

To: Amanda Gorthy; Kimberly Benjamin; Wiggins, Mike; Stevens, Stephanie; Terry, Lisa Subject: http://www.murata.com/emc/knowhow/pdfs/te04ea-1/23to25e.pdf MP0388 and MP0388.I

Please file an IDS for the above identified applications.

Eric B. Janofsky Vice President of Intellectual Property and General Patent Counsel Marvell Semiconductor,

Inc.

700 First Avenue, Mail Stop 509

Sunnyvale, CA 94089

Legal Department Fax Number: 408-752-9034

408-222-2500 Main number: Direct number: 408-222-9071

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PTO/SB/21 (04-04)
Approved for use through 07/31/2006. OMB 0651-0031

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TP ANICHITTAL	A	pplication Number	10/621,12	88							
TRANSMITTAL	Fi	ling Date	July 16, 2003								
FORM		rst Named Inventor	Sutardja, Sehat								
(to be used at all correspondence after initial	Al filing)	rt Unit	2832	2832							
A TRADE ARTHUR	E	Examiner Name J		Jennifer A. Poker							
Total Number of Pages in This Submission	A	ttorney Docket Number	MP0388	8							
ENCLOSURES (check all that apply)											
Fee Transmittal Form	Drawing(s)		After Allowance Communication to Technology Center (TC)								
Fee Attached	Licensing-r	related Papers	Appeal Communication to Board of Appeals and Interferences								
Amendment / Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)								
After Final	Provisiona	Convert to a l Application	Proprietary Information								
Affidavits/declaration(s)		Attorney, Revocation Correspondence Address	Status Letter								
Extension of Time Request	Terminal D	Pisclaimer	Other Enclosure(s) (please identify below):								
Express Abandonment Request	Request fo	or Refund er of CD(s)	Form HDP-1449 (1 page) citing 2 Other Documents-attached; and return receipt postcard								
Certified Copy of Priority Document(s)	Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.									
Response to Missing Parts/ Incomplete Application	,										
Response to Missing Parts under 37 CFR 1.52 or 1.53											
SIGNA	TURE OF APF	PLICANT, ATTORNEY, C	R AGENT								
Firm or Harness, Dickey & Pierce, P.L. Individual name		Attorney Name Michael D. Wiggins		Reg. No. 34,754							
Signature Wull DWW											
Date June 10, 2005											
CERTIFICATE OF TRANSMISSION/MAILING											
I hereby certify that this correspondence Service with sufficient postage as first of Alexandria, VA 22313-1450 on the date st	class mail in ar	le transmitted to the USPTC n envelope addressed to: (or deposited Commissioner	with the United States Postal for Patents, P.O. Box 1450,							
Typed or printed name Lisa M. Terry	, 1	/	Express Mail Label No.	EV 570 164 490 US							
Signature Date June 10, 2005											

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 4.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL for FY 2005 Filing Date	Fees pursuant to the (Effective on 12/08/20 Consolidated Appropria	uu4. ations Act, 2005 (H.R. 4818).		Complete	if Known	
Applicant claims small entity status. See 37 CFR 1.27 Examinar Name. Subardia. Sehat Subardia	,				on Number	10/621,128		
Applicant claims small entity status. See 37 CFR 1.27 Examiner Name Jenniter A Poker				Filing Da	ite	July 16, 2003		
TALLAMOUNT OF PAYMENT (c) 1800		tor FY 20	005	First Nar	ned Inventor	Sutardja, Sehat		
Deposit Account Deposit Account Number: Boyos Other (please identify):	Applicant claim	is small entity statu	us. See 37 CFR 1.27	Examine	r Name	Jennifer A. Poker		
Check Credit Card Money Order None Other (please identify)	TAL AMOUNT	OF DAYMENT (Φ\ 1600	Art Unit		2832		
Check S Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 08-0750 Deposit Account Name: Harness, Dickey & Pierce, P.L.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) Indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Seal information and subtortable on the filling fee Seal information and subtortable deviced on this form. Provide credit card information and subtortable and unbortable on the filling fee Seal Seal Seal Indicated below, except for the filling fee Seal Seal Seal Seal Indicated below, except for the filling fee Seal Seal Seal Seal Seal Seal Seal Se	AL AMOUNT	OF PATIVIENT (S	\$) 1600	Attorney	Docket No.	MP0388		
Deposit Account Deposit Account Number: 08-0750	METHOD OF PA	YMENT (check al	I that apply)					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee	Check 🛭 Cre	edit Card 🔲 Mor	ney Order 🔲 None [Other (p	lease identify	y):		
Charge fee(s) indicated below, except for the filting fee	Deposit Accour	nt Deposit Account	t Number: 08-0750		Deposit Acco	ount Name: Harne	ss, Dickey & F	Pierce, P.L.C.
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments	For the at	ove-identified depo	sit account, the Director	r is hereby a	uthorized to:	(check all that app	ly)	
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2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Pee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Pee(\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 or fraction thereof fraction thereof. See 35 U.S.C. 41(a)1(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): SUBMITTED BY Signature Registration No. (Altomey/Agent) 34,754 Registration No. (Altomey/Agent) 34,754 Telephone 248-641-1600 Jone 10, 200 100 200 100								·····
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